

# Best Available Copy

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/1780,798	FILING DATE 02/09/01				
							APPLICANT(S) JERRY CAIRO					
CLAIMS							*		*		*	
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	/						51	/				
2		/					52	/				
3		/					53	/				
4		/					54	/				
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42		/					92					
43		/					93					
44		/					94					
45	/						95					
46		/					96					
47		/					97					
48	/						98					
49		/					99					
50		/					100					
TOTAL IND.							TOTAL IND.	8+				
TOTAL DEP.							TOTAL DEP.	46				
TOTAL CLAIMS							TOTAL CLAIMS	56				